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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Kimberly First name Antoinette Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	White Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3926	

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Debtor 1 Kimberly Antoinette White

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		2824 186th Street Lansing, IL 60438			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Document Case number (if known) Debtor 1 Kimberly Antoinette White

ar	Tell the Court About	Your E	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> f page 1 and check the approp	by 11 U.S.C. § 342(b) for Individuals Filing friate box.	or Bankruptcy
	choosing to file under	■ C	Chapter 7				
		□с	Chapter 11				
		□с	Chapter 12				
		□с	Chapter 13				
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is sub	pically, if you are paying the fee	neck with the clerk's office in your local courte e yourself, you may pay with cash, cashier's ehalf, your attorney may pay with a credit ca	check, or money
					tallments. If you choose this o	ption, sign and attach the Application for Inc	lividuals to Pay
						tion only if you are filing for Chapter 7. By la	
but is not required to, waive your fee, and may do so only if your income is less than 19 applies to your family size and you are unable to pay the fee in installments). If you cho							
			the Application	on to Have the	Chapter 7 Filing Fee Waived (C	Official Form 103B) and file it with your petition	on.
).	Have you filed for bankruptcy within the	■ No	э.				
	last 8 years?	□ Ye	es.				
			District		When		
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is						
	not filing this case with you, or by a business partner, or by an affiliate?		<i>1</i> 5.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No	o Go to l	ine 12.			
	residence?				ained an eviction judgment aga	uinst you and do you want to stay in your res	idence?
		■ Ye		No. Go to line		,	
				Yes. Fill out Ir bankruptcy pe		on Judgment Against You (Form 101A) and	file it with this

Document Page 4 of 52 Case number (if known) Debtor 1 **Kimberly Antoinette White** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business Yes A sole proprietorship is a business you operate as **Mommy's Little Helper** an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. 2824 186th Street If you have more than one Lansing, IL 60438 sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed.

or a building that needs urgent repairs?

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Debtor 1 **Kimberly Antoinette White**

Case number (if known)

15. Tell the court whether you have received a

Part 5:

briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 52 Case number (if known) Debtor 1 **Kimberly Antoinette White** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." vou have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kimberly Antoinette White Signature of Debtor 2 **Kimberly Antoinette White**

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on March 1, 2017

MM / DD / YYYY

Debtor 1 Kimberly Antoinette White Document Page 7 of 52 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Dabertin	Date	March 1, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Devid M. Debertin		
David M. Dabertin		
Printed name		
David M. Dabertin		
Firm name		
5246 Hohman Avenue, Suite 302		
Hammond, IN 46320		
Number, Street, City, State & ZIP Code		
Contact phone 219-937-1719	Email address	
19314-45		
Bar number & State		

		1700.111116			
Fill in this infor	mation to identify your	case:			
Debtor 1	Kimberly Antoine	ette White			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an
(II KIOWII)				L	amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,600.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	14,600.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	19,307.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	30,097.00
	Your total liabilities	\$	49,404.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,825.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,826.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	personal,	family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

nation to identify your				
	case and this filing:			
Kimberly Antoin	ette White			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
nkruntov Court for the:	NORTHERN DISTRICT OF II	LINOIS		
Tikitupicy Court for tile.	NORTHERN BIOTRIOT OF IE	LINOIO		
				☐ Check if this is an
				amended filing
4004/5				
rm 106A/B				
e A/B· Pror	perty			12/15
		If an accet fite in more than a	and antogony list the asset in	
e as complete and accur e space is needed, attach tion.	ate as possible. If two married peon a separate sheet to this form. On	ple are filing together, both a the top of any additional pag	re equally responsible for su	pplying correct
Each Residence, Buildin	g, Land, or Other Real Estate You	Own or Have an Interest In		
ave any legal or equitab	le interest in any residence, buildir	ng, land, or similar property?		
	-			
t 2.				
s the property?				
Your Vehicles				
icks, tractors, sport u	tility vehicles, motorcycles			
	itility venicles, motorcycles		Do not doduct acquired a	oime or exemptions. But
Dodge	•	the property? Check one	Do not deduct secured cl	aims or exemptions. Put d claims on <i>Schedule D:</i>
	•	the property? Check one	the amount of any secure	
Dodge	Who has an interest in	the property? Check one	the amount of any secure	ed claims on Schedule D:
Dodge Journey	Who has an interest in ■ Debtor 1 only		the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
Dodge Journey 2013	Who has an interest in □ Debtor 1 only □ Debtor 2 only	2 only	the amount of any secure Creditors Who Have Clair Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
Dodge Journey 2013 e mileage:	Who has an interest in □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor	2 only 9btors and another	the amount of any secure Creditors Who Have Clair Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
	rm 106A/B e A/B: Property: e A/B: Property: e as complete and accur e space is needed, attacktion. Each Residence, Building have any legal or equitable: e the property: Your Vehicles ee, or have legal or equitable:	rm 106A/B e A/B: Property eparately list and describe items. List an asset only once. as accomplete and accurate as possible. If two married peopers is needed, attach a separate sheet to this form. On the sace and legal or equitable interest in any residence, building 2. It is the property? Your Vehicles See, or have legal or equitable interest in any vehicles	rm 106A/B e A/B: Property eparately list and describe items. List an asset only once. If an asset fits in more than describe as complete and accurate as possible. If two married people are filing together, both as a space is needed, attach a separate sheet to this form. On the top of any additional pagition. Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In have any legal or equitable interest in any residence, building, land, or similar property? Your Vehicles See, or have legal or equitable interest in any vehicles, whether they are register.	First Name Middle Name Last Name nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS PAB: Property eparately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in a scomplete and accurate as possible. If two married people are filing together, both are equally responsible for su a space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and cas tion. Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In average any legal or equitable interest in any residence, building, land, or similar property?

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Schedule A/B: Property

portion you own?

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Case number (if known) Document Debtor 1 Kimberly Antoinette White Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Checking at Chase Bank** \$50.00 17.1. Checking \$50.00 Marquette Bank Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

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Deb	otor 1 Kimberly A	ntoinette	White		Page 13 of 52	ase number (if known)	
•		omain name	s, websites, p	ets, and other intellecturoceeds from royalties a		s	
ı	■ No	ermits, exclu	usive licenses	ngibles , cooperative association	n holdings, liquor license	es, professional license	es:
	☐ Yes. Give specific i	niormation a	about them				
Мо	ney or property owed	d to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to ☐ No =	•					
	Yes. Give specific in	nformation a	bout them, in	cluding whether you alre	ady filed the returns and	the tax years	
				6 Earned income cre	dit and child tax	State and Feder tax credits	al Unknowr
31.	benefits; u No Yes. Give specific i Interests in insuranc Examples: Health, dis	ages, disabil unpaid loans nformation e policies	ity insurance s you made to	payments, disability ben someone else health savings account (
_	No	ranaa aamn	any of agab n	aliay and list its value			
L	→ Yes. Name the Insu		any or each p npany name:	olicy and list its value.	Beneficiary	<i>r</i> :	Surrender or refund value:
		iary of a livir		a someone who has die ct proceeds from a life in		urrently entitled to rece	ive property because
I		employmer	nt disputes, in	you have filed a lawsui surance claims, or rights		or payment	
ı	_						
L	No	-	ted claims of	every nature, including	g counterclaims of the	edebtor and rights to	set off claims
	■ No □ Yes. Describe each	-	ted claims of	every nature, includin	g counterclaims of the	e debtor and rights to	set off claims

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36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$100.00
Part	5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	o you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.	
	Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38	Accounts receivable or commissions you already earned	
] No	
•	Yes. Describe	
	Debtor is owed apprx. \$900 in unpaid daycare charges from parents.	\$900.00
	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks No Yes. Describe	, chairs, electronic devices
	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No ☐ Yes. Describe	
	Supplies and toys used in daycare	\$500.00
I	nventory I No I Yes. Describe	
	nterests in partnerships or joint ventures No	
	Yes. Give specific information about them	
	Customer lists, mailing lists, or other compilations No.	
	Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	■ No □ Yes. Describe	
_	Any business-related property you did not already list No	
	Yes. Give specific information	

Official Form 106A/B Schedule A/B: Property page 5

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Add the dollar value of all of your entries from Part 5 including any entries for pages you have attached.

45.	Add the dollar value of all of your entries from Part 5, includir for Part 5. Write that number here			\$1,400.00
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You lif you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	Do you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
53.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$11,200.00		
57.	Part 3: Total personal and household items, line 15	\$1,900.00		
58.	Part 4: Total financial assets, line 36	\$100.00		
59.	Part 5: Total business-related property, line 45	\$1,400.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$14,600.00	Copy personal property t	otal \$14,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$14,600.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:			
Debtor 1	Kimberly Antoine	ette White			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check	
				amende	ed fil

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	otions are	you claiming?	Check one only	. even if	vour spouse i	s filina with	vou.
----	--------------------	------------	---------------	----------------	-----------	---------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Miscellaneous household goods and furnishings used by the Debtor(s) in	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
their household Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
3 TVs, DVD player, printer and 2 cell phones	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Personal used clothing Line from Schedule A/B: 11.1	\$100.00		\$100.00	735 ILCS 5/12-1001(a)
Elle Holl Genedale PAB.			100% of fair market value, up to any applicable statutory limit	
Costume jewelry and jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from Goriodale 772. 1211			100% of fair market value, up to any applicable statutory limit	
Checking: Checking at Chase Bank Line from Schedule A/B: 17.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Line from Goriedaie AVD. 1111			100% of fair market value, up to any applicable statutory limit	

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Case number (if known) Document Debtor 1 Kimberly Antoinette White

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking: Marquette Bank Line from Schedule A/B: 17.2	\$50.00	-	\$50.00	735 ILCS 5/12-1001(b)
	Line nom Schedule AVD. 17-2			100% of fair market value, up to any applicable statutory limit	
	State and Federal tax credits: 2016 Earned income credit and child tax	Unknown			305 ILCS 5/11-3
	credit Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Debtor is owed apprx. \$900 in unpaid daycare charges from parents.	\$900.00		\$900.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 38.1			100% of fair market value, up to any applicable statutory limit	
	Supplies and toys used in daycare Line from Schedule A/B: 40.1	\$500.00		\$500.00	735 ILCS 5/12-1001(d)
	Line IIIIII Schedule PVD. 40.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
	■ No				
	☐ Yes. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No	•		•	
	☐ Yes				

Yes

Cas	se 17-06194	Doc 1 Filed 03/01/17 Document	Page 18	1 03/01/17 14:: of 52	17:08 Desc N	/iain
Fill in this inform	ation to identify you		Faue 10	()[.32		
Debtor 1						
Debtor 1	Kimberly Antoi	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the	: NORTHERN DISTRICT OF IL	LINOIS			
Case number						
(if known)			☐ Check	if this is an		
					amend	ded filing
Official Form	106D					
		Mas Have Olaims	C	h Duna a a att		
schedule i	D: Creditors	Who Have Claims	Securea	by Property	<u>y </u>	12/15
		If two married people are filing togetl out, number the entries, and attach it				
number (if known).						
`	nave claims secured b					
	this box and submit t	his form to the court with your other	r schedules. You	u have nothing else to	o report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List All	Secured Claims					
2. List all secured c	laims. If a creditor has	more than one secured claim, list the cre	editor separately	Column A	Column B	Column C
		s a particular claim, list the other creditor ical order according to the creditor's nan		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Americred	it	Describe the property that secures	the claim:	value of collateral. \$19,307.00	claim \$11,200.00	If any \$8,107.00
Creditor's Name		2013 Dodge Journey				
D O Day 7	704.40	As of the date you file, the claim is:	Check all that			
P. O. Box 7 Phoenix, A	-	apply.				
	City, State & Zip Code	☐ Contingent				
Number, Street, C	only, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as	mortgage or secu	red		
Debtor 2 only		car loan)	3 3			
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla community deb	im relates to a	Other (including a right to offset)	Purchase m	oney security inte	erest	
Date debt was incu	rred <u>8/16</u>	Last 4 digits of account num	nber			
	-	Column A on this page. Write that num		\$19,30	7.00	
If this is the last p Write that number		the dollar value totals from all pages	i.	\$19,30	7.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	Page 19	9 of 52	_	
Fill in thi	is information to ide	entify your case	:				
Debtor 1	Kimber	ly Antoinette V	Vhite				
	First Name	,	Middle Name	Last Name			
Debtor 2 (Spouse if, f	iling) First Name		Middle Name	Last Name			
	•						
United St	tates Bankruptcy Co	urt for the: NC	RTHERN DISTRICT OF IL	LINOIS			
Case nur	mber						
(if known)						□ C	heck if this is an
						ar	mended filing
Official	I Form 106E/F	=					
		_	Have Unsecured	Claims			12/15
			t 1 for creditors with PRIORIT		Part 2 for creditors with NO	ONPRIORITY clair	
Schedule (Schedule I left. Attach	G: Executory Contract D: Creditors Who Have	is and Unexpired I e Claims Secured ge to this page. If y	could result in a claim. Also I .eases (Official Form 106G). I by Property. If more space is ou have no information to re	o not include a needed, copy t	any creditors with partially the Part you need, fill it ou	y secured claims it, number the ent	that are listed in ries in the
Part 1:	List All of Your Pl	RIORITY Unsecu	red Claims				
1. Do an	y creditors have prior	rity unsecured clai	ms against you?				
■ No	o. Go to Part 2.						
☐ Ye	9S.						
Part 2:	List All of Your N	ONPRIORITY Un	secured Claims				
3. Do an	y creditors have non	priority unsecured	claims against you?				
□ No	o. You have nothing to r	eport in this part. S	ubmit this form to the court with	your other sche	edules.		
■ Ye	es.						
unsec	cured claim, list the creatione creditor holds a par	litor separately for e	in the alphabetical order of th ach claim. For each claim listed other creditors in Part 3.If you l	l, identify what t	type of claim it is. Do not list	claims already incl	luded in Part 1. If more
							Total claim
4.1	AT & T		Last 4 digits of acc	ount number	4244		\$135.00
	Ionpriority Creditor's Na	ame	When we the debt	in a			
	PO Box 5080 Carol Stream, IL 6	0197-5080	When was the debt	incurred?			
	lumber Street City State	e Zlp Code	As of the date you	file, the claim i	is: Check all that apply		
V	Vho incurred the debt	? Check one.					
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debtor	2 only	☐ Disputed				
	\Box At least one of the de	ebtors and another	Type of NONPRIOR	RITY unsecured	d claim:		
	Check if this claim	is for a communit					
	lebt s the claim subject to	offset?			ration agreement or divorce	that you did not	
_	No	OHSELF	report as priority clai		g plans, and other similar de	ahte	
			·	•	•	ะมเจ	
L	Yes		Other. Specify	On account	<u> </u>		

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Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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Page 21 of 52 Case number (if know) Debtor 1 Kimberly Antoinette White 4.5 \$512.00 Comenity Last 4 digits of account number 6109 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card purchases-Victoria's Secret ☐ Yes 4.6 **Fingerhut** Last 4 digits of account number 3380 \$1,457.00 Nonpriority Creditor's Name **PO Box 166** When was the debt incurred? Newark, NJ 07101-0166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify On account/mailorder ☐ Yes 4.7 **HSBC Card Services** \$1,846.00 Last 4 digits of account number 0754 Nonpriority Creditor's Name PO Box 80084 When was the debt incurred? Salinas, CA 93912-0084 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Collection

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Official Form 106 E/F

debt

■ No

T Yes

Type of NONPRIORITY unsecured claim:

■ Other. Specify Medical bills

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Page 23 of 52 Case number (if know) Document Debtor 1 Kimberly Antoinette White 4.1 \$805.00 **Montgomery Ward** 7429 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2843 When was the debt incurred? Monroe, WI 53566-0843 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.1 6238 Portfolio Recovery Assoc. \$2,219.00 Last 4 digits of account number Nonpriority Creditor's Name P. O. Box 12914 When was the debt incurred? Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection-original creditor Synchrony/JCP ☐ Yes 4.1 Portfolio Recovery Assoc. 3067 \$873.00 Last 4 digits of account number Nonpriority Creditor's Name P. O. Box 12914 When was the debt incurred? Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Amazon

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Collection-original creditor Synchrony

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4.1	Progressive Finance	Last 4 digits of account number 4254	Unknown
	Nonpriority Creditor's Name 10619 South Jordan Gateway Suite 100	When was the debt incurred?	
	South Jordan, UT 84095 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The state year may also state to choose an electory	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured loan	
4.1	Synchrony Bank	Last 4 digits of account number 2952	\$152.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965060	When was the debt incurred?	
	Orlando, FL 32896-5060		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Credit card purchases-TJX	
		— Gillot. Openiny	
4.1 6	T-Mobile Bankruptcy Nonpriority Creditor's Name	Last 4 digits of account number 9315	\$1,322.00
	PO Box 37380 Albuquerque, NM 87176	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Collection	
	· - v	— Outer, Specify	

Case 17-06194 Doc 1 Filed 03/01/17 Entered 03/01/17 14:17:08 Desc Main Document Page 25 of 52 Debtor 1 Kimberly Antoinette White Case number (if know) 4.1 **Target** \$1,242.00 Last 4 digits of account number Nonpriority Creditor's Name P. O. Box 1581 When was the debt incurred? Minneapolis, MN 55440-1581 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Lawsuit ☐ Yes 4.1 3184 Wells Fargo Dealer Services \$7,051.00 Last 4 digits of account number 8 Nonpriority Creditor's Name **National Recovery Center** When was the debt incurred? 2016 PO Box 25341 Santa Ana, CA 92799 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Deficiency ☐ Yes

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address	On which entry in Fait 1 of Fait	2 did you list the original creditor:		
Blitt and Gaines	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
661 Glenn Avenue Wheeling, IL 60090		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Wheeling, in 00030	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?		
Blitt and Gaines	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
661 Glenn Avenue Wheeling, IL 60090		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Wilcomig, in 00000	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?		
Client Services	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
3451 Harry S. Truman Blvd.		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Saint Charles, MO 63301	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?		
Convergent Outsourcing	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
800 SW 39th St		Part 2: Creditors with Nonpriority Unsecured Claims		

Name and Address

Debtor 1 Kimberly Antoinette White	Document P	age 26 of 52 Case number (if know)
PO Box 9004 Renton, WA 98057	Last 4 digits of account number	r
Name and Address	On which entry in Part 1 or Part	t 2 did you list the original creditor?
Cook County Circuit Court-6th	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
16501 S. Kedzie Parkway 16-M6-0010607 Markham, IL 60428		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	r
Name and Address	On which entry in Part 1 or Part	t 2 did you list the original creditor?
Cook County Circuit Court-6th	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
16501 S. Kedzie Parkway 16 M6 4820 Markham, IL 60428		■ Part 2: Creditors with Nonpriority Unsecured Claims
Markitalii, IL 00420	Last 4 digits of account number	r
Name and Address	On which entry in Part 1 or Part	t 2 did you list the original creditor?
First Financial Asset Mgmt	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
3091 Governors Lake Drive, Ste 500 Peachtree Corners, GA 30071		■ Part 2: Creditors with Nonpriority Unsecured Claims
reachitee Corners, GA 30071	Last 4 digits of account number	r
Name and Address	On which entry in Part 1 or Part	t 2 did you list the original creditor?
GC Services	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 3026		Part 2: Creditors with Nonpriority Unsecured Claims
6330 Gulfton Houston, TX 77253-3026		
11000001, 17, 11200 0020	Last 4 digits of account number	r
Name and Address	On which entry in Part 1 or Part	t 2 did you list the original creditor?
Merchants Credit Guide	Line 4.11 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
223 W. Jackson Blvd. #400 Chicago, IL 60606		Part 2: Creditors with Nonpriority Unsecured Claims
Cilicago, in 00000	Last 4 digits of account number	r
Name and Address	On which entry in Part 1 or Part	t 2 did you list the original creditor?
Meyer & Njus	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
33 N. Dearborn Street, Ste 1301 Chicago, IL 60602		■ Part 2: Creditors with Nonpriority Unsecured Claims
Cincago, it 00002	Last 4 digits of account number	r
Part 4: Add the Amounts for Each Type of	of Unsecured Claim	
Total the amounts of certain types of unsecured	claims. This information is for st	atistical reporting purposes only 28 U.S.C. \$159. Add the amounts for each

Total the amounts of certa type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 30,097.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 30,097.00

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Debtor 1 Kimberly Antoinette White

		I A A A I II I I I		
Fill in this infor	mation to identify your	case:		
Debtor 1	Kimberly Antoine	ette White		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
2.7	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
	,				

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		1700.11111	:III Paue / 9 t	1.3/	
Fill in this	information to identify your				
Debtor 1	Kimberly Antoine	ette White			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)				_	eck if this is an ended filing
Officia	l Form 106H				-
	lule H: Your Cod	ebtors			12/15
fill it out, a your name	and number the entries in the eand case number (if known)	boxes on the left. Attach Answer every question	n the Additional Page to	ion. If more space is needed, copy the this page. On the top of any Additions as a codebtor	
1. DO	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codeptor.	
■ No □ Yes					
	hin the last 8 years, have you na, California, Idaho, Louisiana,			y? (Community property states and teri	ritories include
_		Trovada, From Moxico, Fa	one race, reade, reading	rigion, and moorionin	
	. Go to line 3. s. Did your spouse, former spot	ise or legal equivalent live	with you at the time?		
	s. Dia your spouse, former spot	aso, or logal equivalent live	s with you at the time.		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. Lis sure you have listed the creditor on \$ 6G). Use Schedule D, Schedule E/F,	Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom Check all schedules that apply:	you owe the debt
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	<u> </u>
-				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
22				□ Sobodulo D. line	
3.2	Name			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	_
-	Number Street	State	ZIP Code	_	
	City	Sidif	ZIP Code		

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Fill	in this information to identify your c	366.				ı				
	, ,	ntoinette White								
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_					
(If kr	se number fficial Form 106I					☐ An ☐ A s		J		tition chapter date:
	chedule I: Your Inc	omo				MM	I / DD/ Y	YYY		12/15
sup spo atta Par	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The Describe Employment	are married and not filing w	ng jointly, and your s ith you, do not includ	pouse i le inforn	s livi natio	ing with yo on about y	ou, inclu our spo	ide informa use. If mor	ation ab	bout your e is needed,
1.	Fill in your employment information.		Debtor 1			С	Debtor 2	or non-fili	ng spor	use
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employed			
	information about additional employers.		☐ Not employed				☐ Not er	nployed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name	Daycare-owner Mommy's Little Helper							
	Occupation may include student or homemaker, if it applies.	Employer's address	2824 16th Street Lansing, IL 6043	•						
		How long employed to	here? 12 mont	hs			_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for a	any I	ine, write \$	0 in the	space. Inclu	ıde you	r non-filing
	u or your non-filing spouse have mees space, attach a separate sheet to		ombine the information	for all e	mplo	yers for th	at perso	n on the line	es belov	w. If you need
						For Debto	or 1	For Debt		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$		N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A

Calculate gross Income. Add line 2 + line 3.

0.00

N/A

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Debt	or 1	Kimberly Antoinette White	_	C	Case number (if k	nown)				
					For Debtor 1			Debtor a-filing s		
	Сор	y line 4 here	4.	_	\$	0.00	\$	_	N/A	-
5.	List	all payroll deductions:								
	5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5a. 5b. 5c. 5d. 5e. 5f.). :. !.	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$_ \$_ \$_ \$_		N/A N/A N/A N/A N/A	- - -
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.		\$	0.00	\$ + \$		N/A N/A	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— ³¹¹		. —	0.00	τυ_ \$		N/A N/A	-
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$	0.00	\$		N/A	-
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food stamps Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.		\$ 2,30 \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ + \$		N/A N/A N/A N/A N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,82	5.00	\$_		N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	2,825.00	+ \$_		N/A	= \$	2,825.00
11.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						. 12.	\$	2,825.00 ned y income
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?						viitili	,
		Yes. Explain: Debtor expects business to improve and reflects	that	t he	ere.					

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Fill	in this informa	ation to identify yo	our case:			Ī		
	otor 1	Kimberly An		Nhite		Che	ck if this is:	
		Tumberry An	toniotto (An amended filing			
	otor 2 ouse, if filing)	-					A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number							
	nown)							
	··· · · -	4001				_		
		orm 106J						
		J: Your		ISES If two married people a	re filing together, b	oth are equ	ially responsible fo	12/19
info	ormation. If m		eded, atta	ch another sheet to this				
Par		ribe Your House	hold					
1.	Is this a joir							
		es Debtor 2 live	in a separ	ate household?				
	□N							
	ПΥ	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Deb	otor 2.	
2.	Do you hav	e dependents?	☐ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			son		_ 3	Yes
					son		14	□ No ■ Yes
								□ No
					son		18	Yes
								□ No □ Yes
3.		penses include	. =	No				□ Tes
		f people other to d your depende		Yes				
Par	<u> </u>	nate Your Ongoi		v Expenses				
Est exp	imate your ex	xpenses as of year the l	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
Incl	lude expense	es paid for with	non-cash	government assistance i	f you know			
	value of suc ficial Form 10		d have inc	luded it on Schedule I:	Your Income		Your exp	enses
	-					_		
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4. \$	\$	950.00
	If not include	ded in line 4:						
		estate taxes				4a. S	·	0.00
	•	erty, homeowner's e maintenance re		's insurance Ipkeep expenses		4b. \$ 4c. \$	·	12.00 0.00
		eowner's associat				4d. 3		0.00
5.	Additional ı	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$	\$	0.00

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00.00
50.00
00.00
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25.00
26.00
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1.00
cause of
ause 0

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Fill in this infor	mation to identify your	case:			
Debtor 1	Kimberly Antoine	ette White			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
000 1 1 5	4005				
Official For	m 106Dec				
Declarat	tion About a	ın Individual	Debtor's So	chedules	12/15
					12/10
If two married p	eople are filing togethe	r, both are equally respo	nsible for supplying co	rrect information.	
obtaining mone		n connection with a bank			nent, concealing property, or , or imprisonment for up to 20
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankr	ruptcy Petition Preparer's Notice,
				Declaration, a	and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration	n and
X /c/ Kin	nberly Antoinette Wh	ita	Х		
	erly Antoinette White	IIC	Signature of	f Debtor 2	
	ire of Debtor 1		Oiginaturo oi		

Date _____

Date March 1, 2017

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Fill	in this inform	ation to identify you	r case:			
Deb	otor 1	Kimberly Antoir	nette White Middle Name	Last Name		
Deb	otor 2	First Name	Middle Name	Last Name		
(Spot	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS		
Cas	e number					
(if kno						Check if this is an
						amended filing
~	–					
	ficial For					
Sta	atement	of Financial	Affairs for Individ	luals Filing for B	Bankruptcy	4/10
			ible. If two married people a attach a separate sheet to			
). Answer every que		uns form. On the top of an	y additional pages, write y	our name and case
Pari	t1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	what is your	current marital statu	18 ?			
	☐ Married					
	Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	Yes. List	all of the places you	lived in the last 3 years. Do no	ot include where you live nov	٧.	
	Debtor 1 Pri	or Address:	Dates Debtor 1	Debtor 2 Prior Ad	ddress:	Dates Debtor 2
	18757 Hen		From-To: 8/2009 to 6/20	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	Lanonig, it	-				
			ver live with a spouse or leg			
	-					
	■ No □ Ves Mal	ke sure vou fill out Sc	hedule H: Your Codebtors (Of	ficial Form 106H)		
	i es. iviai	ke sure you iiii out oo	redule 11. Tour Codebiors (Or	nciai i oim 1001).		
Part	Explain	n the Sources of You	ır Income			
	Fill in the total	I amount of income yo	nployment or from operating u received from all jobs and a	Ill businesses, including part	-time activities.	endar years?
	If you are filing	g a joint case and you	have income that you receive	e together, list it only once ui	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$548.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

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Case number (if known) Document

Debtor 1 Kimberly Antoinette White

				Debtor 1			Debtor 2					
				Sources of income Check all that apply.		income deductions and ons)	Debtor 2 Sources of income Check all that apply. Wages, commissions, bonuses, tips		(befo	ss income ore deductions exclusions)		
For last calendar year: (January 1 to December 31, 2016)		31, 2016)	☐ Wages, commissions, bonuses, tips		\$15,124.00							
				Operating a business			☐ Opera	ating a busine	ess			
		dar year be December		☐ Wages, commissions, bonuses, tips		\$9,991.00	☐ Wage	es, commissio , tips	ons,			
				Operating a business			☐ Opera	ating a busine	ess			
v L	vinnings. .ist each	If you are fil	ng a joint cas	pensions; rental income; inter se and you have income that yome from each source separa	you receive	ed together, list it	only once u	nder Debtor 1		ling and lottery		
				Debtor 1			Debtor 2	•				
				Sources of income Describe below.	each s	deductions and		of income	(befo	ss income ore deductions exclusions)		
Part	3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankrupto	су						
	Are eithe □ No.	Neither De individual p	ebtor 1 nor Dorimarily for a	's debts primarily consume bebtor 2 has primarily consu- personal, family, or househoure you filed for bankruptcy, di	umer debt old purpose	."			∑. § 101(8) as	"incurred by ar		
		□ Yes	List below e paid that cr not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for t t on 4/01/19 and every 3 year	nts for dom his bankru	estic support obliques	gations, suc	h as child sur	pport and alim			
	Yes.			r both have primarily consure you filed for bankruptcy, di			al of \$600 or	· more?				
		■ No.	Go to line 7									
		□ _{Yes}	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.								
	Creditor	's Name and	d Address	Dates of payme	ent	Total amount	Amount still	you Was	s this paymer	nt for		

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount Amoun		Reason for	this payment
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos			l owe	count of a de	ebt that benefited an
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount Amoun	t you I owe	Reason for Include cred	this payment
Do	rt 4: Identify Legal Actions, Repossession	and Fernalesures	paiu stii	IOWE	molade crea	itoi s riame
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Capital One v. White 16 M6 0010607	Collection	Cook County Circuit Court-6th 16501 S. Kedzie Parkway Markham, IL 60428		☐ Pending ☐ On appeal ☐ Concluded	
	Target v. White Collection 16 M6 4820		Cook County Circuit Court-6th 16501 S. Kedzie Parkway Markham, IL 60428		☐ Pending ☐ On appeal ☐ Concluded	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below.		erty repossessed, foreclosed	, garnis	hed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened			property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. Creditor Name and Address		_	Date a	action was	mounts from your Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possession of an a	taken		fit of creditors, a

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Case number (if known) Document Debtor 1 Kimberly Antoinette White

Part	5: List Certain Gifts and Contributions	i						
	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	ptcy,	did you give any gifts with a total value of more t	han \$600 per person	?			
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:		Describe the gifts	Dates you gave the gifts	Value			
	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No							
	☐ Yes. Fill in the details for each gift or col Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value			
Part	6: List Certain Losses							
,	or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Descr i	ibe any insurance coverage for the loss the amount that insurance has paid. List pending	Date of your loss	Value of property			
6.	7: List Certain Payments or Transfers Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pr	tcy, d			erty to anyone you			
	No ■ Yes. Fill in the details.	eparer	s, or credit counseling agencies for services required	d in your bankruptcy.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	David M. Dabertin 5246 Hohman Avenue, Suite 302 Hammond, IN 46320		Attorney Fees		\$760.00			
	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that y No Yes. Fill in the details.	itors o		or transfer any prope	erty to anyone who			
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

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Debtor 1 **Kimberly Antoinette White**

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer		paymer	pe any property or nts received or debts exchange	Date transfer was made	
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No □ Yes. Fill in the details.		ny property to a	self-settled	trust or similar device o	of which you are a	
	Name of trust	Description and v	alue of the prop	erty transf	erred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or						
	houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.				,	, •	
		Last 4 digits of Type of account or account number instrument			Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	r bankruptcy, an	y safe depo	osit box or other deposi	tory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe th	ne contents	Do you still have it?	
22.	Have you stored property in a storage unit of	r place other than you	home within 1	year before	you filed for bankruptc	y?	
	NoYes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe th	ne contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control f	or Someone Else					
23.	23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe th	ne property	Value	
Par	t 10: Give Details About Environmental Info	rmation					
For	the purpose of Part 10, the following definitio	ns apply:					

Official Form 107

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Debtor 1 **Kimberly Antoinette White**

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Ves. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Ves. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busin A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Describe the nature of the business Employer Identification number	ha	hazardous material, pollutant, contaminant, or similar term.								
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Pes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Pes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Per Code) B No Pes. Fill in the details. Case Title Case Number Case Number Street, City, State and ZIP Code) Part Case Number Street, City, State and ZIP Code) Part Case Number Case Number Street, City, State and ZIP Code) Part III Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busines are a partner in a partnership A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Pescribe the nature of the business Name Address Name of accountant or bookkeeper Mommy's Little Helper Home-based daycare Employer Identification number Dates business existed Employer Identification number Dates business Name Address (Number, Street, City, State and ZIP Code) Part III Silve Details About Your Business Part 12. Employer Identification number Do not include Social Security number Dates business existed Employer Identification number Do not include Social Security number Dates business existed Employer Identification number Dates business Name of accountant or bookkeeper	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.									
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZiP Code) Proceedings (Now it Now it No	24. Ha	las	any governmental unit notified you that	t you r	may be liable or potentially liabl	e und	ler or in viol	ation of an environme	ental law?	
Address (Number, Street, City, State and ZIP Code) ZIP Code) ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation And or an owner of a least 5% of the voting or equity securities of a cor										
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and or No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Stat case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busin A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address Name of accountant or bookkeeper Mommy's Little Helper Business existed Home-based daycare Employer Identification number Do not include Social Security number. Same as SSN					Address (Number, Street, City, State a			ntal law, if you	Date of notice	
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date Address (Number, Street, City, State and ZIP Code) Date Address (Number, Street, City, State and ZIP Code) Date	25. Ha			any re	elease of hazardous material?					
Address (Number, Street, City, State and ZIP Code) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Business Name Address (Number, Street, City, State and ZIP Code) Anommy's Little Helper Mommy's Little Helper 2824 186th Street		_								
No Yes. Fill in the details. Case Title					Address (Number, Street, City, State a			ntal law, if you	Date of notice	
Case Title Case Number Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7: Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busin A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Mommy's Little Helper Home-based daycare EIN: Same as SSN	26. Ha	lave	e you been a party in any judicial or ad	ministr	rative proceeding under any en	vironn	nental law?	Include settlements	and orders.	
Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busin A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Employer Identification number Do not include Social Security number. Dates business existed Employer Identification number Do not include Social Security number. Same as SSN		-								
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busin A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Mommy's Little Helper Home-based daycare Ein: Same as SSN	_				Name Address (Number, Street, City,	Nat	ture of the c	ase	Status of the case	
■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Mommy's Little Helper Home-based daycare Employer Identification number Do not include Social Security number Dates business existed EIN: Same as SSN	Part 1	11:	Give Details About Your Business or	Conne	ections to Any Business					
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Mommy's Little Helper Mome-based daycare Address Home-based daycare EIN: Same as SSN	27. W	Vith	in 4 years before you filed for bankrup	tcy, die	d you own a business or have a	ny of	the followin	ng connections to any	/ business?	
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Home-based daycare EIN: Same as SSN			■ A sole proprietor or self-employed	in a tra	nde, profession, or other activity	y, eith	er full-time	or part-time		
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Home-based daycare EIN: Same as SSN			☐ A member of a limited liability com	oany (L	LC) or limited liability partners	hip (L	LP)			
□ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Mommy's Little Helper Home-based daycare Employer Identification number Do not include Social Security number Dates business existed EIN: Same as SSN			☐ A partner in a partnership							
□ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Mommy's Little Helper 2824 186th Street No. None of the above applies. Go to Part 12. Employer Identification number Do not include Social Security number Dates business existed EIN: Same as SSN			☐ An officer, director, or managing ex	ecutiv	e of a corporation					
Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Mommy's Little Helper 2824 186th Street Describe the nature of the business Name of accountant or bookkeeper Dates business existed EIN: Same as SSN			☐ An owner of at least 5% of the voting or equity securities of a corporation							
Business Name Address (Number, Street, City, State and ZIP Code) Mommy's Little Helper 2824 186th Street Describe the nature of the business Employer Identification number Do not include Social Security number Dates business existed EIN: Same as SSN		□ No. None of the above applies. Go to Part 12.								
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed Home-based daycare EIN: Same as SSN 2824 186th Street			Yes. Check all that apply above and fil	l in the	e details below for each busines	SS.				
Mommy's Little Helper Home-based daycare EIN: Same as SSN 2824 186th Street	A	Add	dress				Employer Identification number Do not include Social Security number or ITIN.			
2824 186th Street		(,, , ,,	IValli	e of accountant of bookkeeper		Dates business existed			
	2	282	24 186th Street	Hom	ne-based daycare					

Page 41 of 52 Case number (if known) Debtor 1 Kimberly Antoinette White 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kimberly Antoinette White Signature of Debtor 2 **Kimberly Antoinette White** Signature of Debtor 1 Date March 1, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Filed 03/01/17

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Document

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Fill in this inform	nation to identify your	case.				
Debtor 1	Kimberly Antoine	ette White Middle Name		Last Name		
Debtor 2	· ···ot · ·tai···o	imadio Hame		Zastrianie		
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLIN	NOIS		
Case number						
(if known)						☐ Check if this is an
						amended filing
Official For Statemen		n for Indiv	iduals l	Filing Under Ch	apter 7	12/15
If you are an indiv	vidual filing under cha	pter 7, you must fill	out this form	if:		
creditors have	claims secured by yo	ur property, or				
You must file this	er is earlier, unless th	ithin 30 days after	you file your b	pankruptcy petition or by the se. You must also send copi		
	ople are filing together	r in a joint case, bo	th are equally	responsible for supplying c	orrect informa	tion. Both debtors must
	nd accurate as possib ur name and case nur		needed, attac	ch a separate sheet to this fo	orm. On the top	p of any additional pages,
Part 1: List Yo	ur Creditors Who Hav	e Secured Claims				
			.			
1. For any credito information bel	-	art 1 of Schedule D	: Creditors Wi	no Have Claims Secured by	Property (Office	cial Form 106D), fill in the
	ditor and the property t	hat is collateral	What do you secures a d	u intend to do with the prope ebt?		Did you claim the property as exempt on Schedule C?
			_			
Creditor's Ar	nericredit			r the property.		No
name.			_	ne property and redeem it. e property and enter into a		□Yes
Description of	2013 Dodge Journ	ey		ation Agreement.		_ 100
property			☐ Retain the	e property and [explain]:		
securing debt:						
Day O. Liet Vo.	Um aveniera d Danasana	I Duamantu I aaaaa				
	ur Unexpired Persona d personal property le		in Schedule G	: Executory Contracts and I	Jnexpired Leas	ses (Official Form 106G), fill
in the information	below. Do not list rea	ıl estate leases. Un	expired leases	s are leases that are still in e es not assume it. 11 U.S.C. §	ffect; the lease	e period has not yet ended.
Describe your un	nexpired personal pro	perty leases			Will t	the lease be assumed?
		•				
Lessor's name:	and				□N	lo
Description of lease Property:	o c u				□ Y	es
Lessor's name:					□N	lo
Description of leas	sed					
Property:					□ Y	es
Lessor's name:					□N	lo

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor	1 Kimberly Antoinette White	Case number (if known)
Descrin	otion of leased	
Propert		☐ Yes
	s name:	□ No
Propert	otion of leased by:	☐ Yes
	s name:	□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased Property:		□ No
		☐ Yes
	's name:	□ No
Descrip Propert	otion of leased ty:	☐ Yes
Part 3:	Sign Below	
	penalty of perjury, I declare that I have indicated my intention ally that is subject to an unexpired lease.	pout any property of my estate that secures a debt and any personal
X /s	/ Kimberly Antoinette White	x
	imberly Antoinette White gnature of Debtor 1	Signature of Debtor 2
Da	mate March 1, 2017	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-06194 Doc 1 Filed 03/01/17 Entered 03/01/17 14:17:08 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e _	Kimberly Antoi	inette White		Case No		
				Debtor(s)	Chapter	7	
		DISC	CLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	com	npensation paid to	. § 329(a) and Fed. Bankr. P. 2016(b me within one year before the filing of the debtor(s) in contemplation of	of the petition in bankrupto	y, or agreed to be pa	id to me, for services rendered	or to
		For legal services	s, I have agreed to accept		\$	760.00	
		Prior to the filing	g of this statement I have received		\$	760.00	
		Balance Due			\$	0.00	
2.	The	source of the com	npensation paid to me was:				
		■ Debtor	☐ Other (specify):				
3.	The	e source of compen	nsation to be paid to me is:				
		■ Debtor	☐ Other (specify):				
4.		I have not agreed	to share the above-disclosed comper	sation with any other perso	n unless they are me	mbers and associates of my lav	v firm.
			hare the above-disclosed compensati ment, together with a list of the name				. A
5.	In r	return for the above	e-disclosed fee, I have agreed to reno	ler legal service for all aspe	cts of the bankruptc	case, including:	
	b. l c. l	Preparation and fil Representation of [Other provisions Exemption agreement	btor's financial situation, and renderi ling of any petition, schedules, staten the debtor at the meeting of creditors as needed] planning; preparation and filin is in the best interest of the de nce of liens on household good	nent of affairs and plan whi and confirmation hearing, g of reaffirmation agree btor; preparation and f	ch may be required; and any adjourned h ements and applic	earings thereof;)(A)
6.	Ву	Amendmer debtor in a proceeding services re Preparation	e debtor(s), the above-disclosed fee onts resulting from Debtor's failury dischargeability action, judig. Any services resulting from telated to mortgage loan modificated from the debtor.	re to cooperate or prov cial lien avoidances, re he Debtor's failure to c ations, sale of property	ride complete info lief from stay acti coperate with the or settlement of	ons or any other adversary Chapter 7 Trustee. Any lawsuits by outside couns	y el.
				CERTIFICATION			
this		rtify that the foreg cruptcy proceeding	oing is a complete statement of any ag.	agreement or arrangement f	or payment to me fo	representation of the debtor(s)	in
	Marc	ch 1, 2017		/s/ David M. Dal			
1	Date			David M. Daber Signature of Attor			
				David M. Daber	tin		
					venue, Suite 302		
				Hammond, IN 4 219-937-1719 I Name of law firm	6320 Fax: 219-937-1984		

United States Bankruptcy Court Northern District of Illinois

In re	Kimberly Antoinette White		Case No.				
		Debtor(s)	Chapter	7			
	VERIF	FICATION OF CREDITOR MA	TRIX				
	Number of Creditors:						
	The above-named Debtor(s) her (our) knowledge.	reby verifies that the list of creditor	rs is true and c	correct to the best of my			
Date:	March 1, 2017	/s/ Kimberly Antoinette White Kimberly Antoinette White Signature of Debtor					

Internal Revenue Service Insolvency P.O. Box 7346 Philadelphia, PA 19101-7346

Illinois Dpt. of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Equifax Attn: Bankruptcy Dept PO Box 740241 Atlanta, GA 30374

Transunion Attn: Bankruptcy Dept PO Box 1000 Chester, PA 19022

Experian
Attn: Bankruptcy Dept
PO Box 2002
Allen, TX 75013

Americredit P. O. Box 78143 Phoenix, AZ 85062

AT & T PO Box 5080 Carol Stream, IL 60197-5080

Blitt and Gaines 661 Glenn Avenue Wheeling, IL 60090

Capital One Bankruptcy Dept. 6125 Lakeview Road, Ste. 800 Charlotte, NC 28269-2605

Client Services 3451 Harry S. Truman Blvd. Saint Charles, MO 63301 Comenity
Bankruptcy Department
PO Box 182125
Columbus, OH 43218-2125

Convergent Outsourcing 800 SW 39th St PO Box 9004 Renton, WA 98057

Cook County Circuit Court-6th 16501 S. Kedzie Parkway 16-M6-0010607 Markham, IL 60428

Cook County Circuit Court-6th 16501 S. Kedzie Parkway 16 M6 4820 Markham, IL 60428

Fingerhut PO Box 166 Newark, NJ 07101-0166

First Financial Asset Mgmt 3091 Governors Lake Drive, Ste 500 Peachtree Corners, GA 30071

GC Services
P.O. Box 3026
6330 Gulfton
Houston, TX 77253-3026

HSBC Card Services PO Box 80084 Salinas, CA 93912-0084

Indiana Department of Workforce Dev
10 North Senate
Indianapolis, IN 46204

Macy's/GE Money Bank Bankruptcy Processing PO Box 8053 Mason, OH 45040 Merchants Credit Guide 223 W. Jackson Blvd. #400 Chicago, IL 60606

Meyer & Njus 33 N. Dearborn Street, Ste 1301 Chicago, IL 60602

Midwest Express Care 1500 S. Indianapolis Blvd. Schererville, IN 46375-1316

Montgomery Ward PO Box 2843 Monroe, WI 53566-0843

Portfolio Recovery Assoc. P. O. Box 12914 Norfolk, VA 23541

Progressive Finance 10619 South Jordan Gateway Suite 100 South Jordan, UT 84095

Synchrony Bank Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060

T-Mobile Bankruptcy PO Box 37380 Albuquerque, NM 87176

Target
P. O. Box 1581
Minneapolis, MN 55440-1581

Wells Fargo Dealer Services National Recovery Center PO Box 25341 Santa Ana, CA 92799